ROBERT L REYNOLDS Case No.

BUREAU OF MEDICAL ECONOMICS 326 EAST CONOADO RD PHOENIX, AZ 85004

CAPITAL ONE BANK
P.O. BOX 60024
CITY OF INDUSTRY, CA 91716

GE CAPITAL RETAIL BANK PO BOX 960061 ORLANDO, FL 32896

GMAC MORTGAGE P.O. BOX 4622 WATERLOO, IA 50704

IRS PO BOX 105416 ATLANTA, GA 30348-5416

PRO CONSULTING SERVICES COLLECTIONS DIVISION PO BOX 66768 HOUSTN, TX 77266

SHELL FLEET
PROCESSING CENTER
PO BOX 183019
COLUMBUS, OH 43218

SPECIALIZED LOAN SERVICING, LLC PO BOX 105219 ATLANTA, GA 30348-5219

WELLS???? PO BOX 54349 LOS ANGELES, CA 90054

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

DECLARATION

| Debtor (s) ' Name (s) | Case No |
|-----------------------------|--|
| ROBERT L REYNOLDS | |
| I, ROBERT L REYNOLDS , | do hereby certify, under penalty |
| | st, consisting of 1_sheets(s), is complete, correct and consistent with the debtor(s |
| Date of execution: 8/7/2012 | s/ ROBERT L REYNOLDS |
| SANDRA L. COFFMAN | ROBERT L REYNOLDS |
| | |
| | |
| | |
| | |
| | |
| SCANNING | |
| REVISED 11/19/96 | |

| United States Bankruptcy Court District of Arizona | | | | | Volunta | ary Po | etition |
|---|--|--|--|--|---|--|----------------------------------|
| Name of Debtor (if individual, enter Last, First, Middle): REYNOLDS, ROBERT, L | Na | me of Joint De | ebtor (Spouse) (La | st, First, Middle): | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): REDROCK CONCRETE PLUMBING, LLC. FOREST CREEK HOME IMPROVEMENT. | | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): | | | | |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (II than one, state all): 9175, SAME | IN)/Complete EIN(if m | | st four digits o | of Soc. Sec. or Indi | vidual-Taxpayer I.D. (IT | ΓIN)/Comp | plete EIN(if more than |
| Street Address of Debtor (No. & Street, City, and State): 1826 MARTINIQUE DR. | | Str | eet Address of | f Joint Debtor (No | . & Street, City, and Stat | te): | |
| LAKE HAVASU CITY, AZ | CODE 86406 | 5 | ZIP CODE | | | | |
| County of Residence or of the Principal Place of Business MOHAVE | : | Co | unty of Reside | ence or of the Prin | cipal Place of Business: | | |
| Mailing Address of Debtor (if different from street address SAME | s): | Ma | ailing Address | of Joint Debtor (if | different from street add | dress): | |
| ZIF Location of Principal Assets of Business Debtor (if differen | CODE SAME | | | | 2 | ZIP CODI | Ξ |
| • | t from street address abo | ove): | | | | ZIP CODE | |
| Type of Debtor (Form of Organization) | Nature (Check one box) | of Business | s | | pter of Bankruptcy Co the Petition is Filed (C | | |
| (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Health Care But Single Asset Re U.S.C. § 101(5) Railroad Stockbroker Commodity Bro Clearing Bank Other | eal Estate as (1B) | defined in 11 | Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 | Re Mi Ch Re | ecognition [ain Procedual | Petition for n of a Foreign |
| Chapter 15 Debtors | | empt Entity | | | Nature of D (Check one b | | |
| Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: (Check box, if app. Debtor is a tax-exempt under Title 26 of the U Code (the Internal Revenue) | | exempt organ | Debts are primarily consumer debts, defined in 11 U.S.C. S 101(S) as "in regard by a second by a seco | | | | |
| Filing Fee (Check one box) | | | Check one | | Chapter 11 Debtors | S | |
| ✓ Full Filing Fee attached ☐ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). ☐ Check if: ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment of 4/01/13 and every three years thereafter). ☐ Check if: ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment of 4/01/13 and every three years thereafter). ☐ Check all applicable boxes ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). | | | | g debts owed to | | | |
| Statistical/Administrative Information | | | | | | | THIS SPACE IS FOR COURT USE ONLY |
| ☐ Debtor estimates that funds will be available for distri ☐ Debtor estimates that, after any exempt property is ex expenses paid, there will be no funds available for dis | cluded and administrati | ive | | | | | |
| Estimated Number of Creditors | | | | | | | |
| 1- 50- 100- 200- 1,000- 49 99 199 999 5,000 | 5,001- 10,001- 10,000 25,000 | 25,001- 50,000 | 50,001- 100,000 | Over 100,000 | | | |
| Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000 \$50,000 \$1 to \$100 million million Estimated Liabilities | 0,001 \$10,000,001 \$ 0 to \$50 to million n | 550,000,001 o \$100 nillion | \$100,000,000 to \$500 million | 1 \$500,000,001 to \$1 billion | More than \$1 billion | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,00 \$50,000 \$1 to \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 | to \$50 to | 50,000,001 o \$100 pillion F iled 08 | to \$500 | \$500,000,001 to \$1 billion | More than \$1 billion 08/07/12 03:39 | 9:43 | Desc |

Doc 11 Filed 08/07/12 Entered 08/07/12 03:39:43 Desc Main Document Page 3 of 49 **B1** (Official Form 1) (12/11) FORM B1, Page 2

| ` | , , | | , , | | |
|--|--|--|---------------|--|--|
| Voluntary Petis (This page must | tion be completed and filed in every case) | Name of Debtor(s): ROBERT L REYNOLDS | | | |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.) | | | | | |
| Location Where Filed: | NONE | Case Number: | Date Filed: | | |
| Location | NONE | Case Number: | Date Filed: | | |
| Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) | | | | | |
| Name of Debtor: Case Number: Date Filed: | | | | | |
| NONE District: | | Relationship: | Judge: | | |
| | | • | | | |
| 10Q) with the Secur of the Securities Exc | Exhibit A debtor is required to file periodic reports (e.g., forms 10K and ities and Exchange Commission pursuant to Section 13 or 15(d) change Act of 1934 and is requesting relief under chapter 11.) | Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). | | | |
| Exhibit A is at | ttached and made a part of this petition. | X Not Applicable | Dete | | |
| | | Signature of Attorney for Debtor(s) | Date | | |
| | Ext | nibit C | | | |
| | or have possession of any property that poses or is alleged to pose a bit C is attached and made a part of this petition. | threat of imminent and identifiable harm to public healt | th or safety? | | |
| | Exh | aibit D | | | |
| (To be completed by | v every individual debtor. If a joint petition is filed, each spouse must | t complete and attach a separate Exhibit D.) | | | |
| ☐ Exhibit D | completed and signed by the debtor is attached and made a part of the | his petition. | | | |
| If this is a joint petit | | | | | |
| | | and a California della | | | |
| Exhibit D | also completed and signed by the joint debtor is attached and made a | ding the Debtor - Venue | | | |
| | (Check any | applicable box) | | | |
| ₫ | Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. | | | | |
| | There is a bankruptcy case concerning debtor's affiliate. general partner, or partnership pending in this District. | | | | |
| Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District. or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | | | |
| Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) | | | | | |
| | Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following). | | | | |
| (Name of landlord that obtained judgment) | | | | | |
| | | (Address of landlord) | | | |
| | Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and | | | | |
| | Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. | | | | |
| | Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)). | | | | |

B1 (Official Form 1) (12/11) FORM B1, Page 3

| | , 8 |
|--|---|
| Voluntary Petition | Name of Debtor(s): |
| (This page must be completed and filed in every case) | ROBERT L REYNOLDS |
| Sign | atures |
| Signature(s) of Debtor(s) (Individual/Joint) | Signature of a Foreign Representative |
| I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). | I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. |
| X s/ROBERT L REYNOLDS | X Not Applicable |
| Signature of Debtor ROBERT L REYNOLDS | (Signature of Foreign Representative) |
| X Not Applicable | |
| Signature of Joint Debtor | (Printed Name of Foreign Representative) |
| 951-317-2368 Telephone Number (If not represented by attorney) | |
| 8/7/2012 | Date |
| Date | |
| Signature of Attorney | Signature of Non-Attorney Petition Preparer |
| X Not Applicable Signature of Attorney for Debtor(s) | I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been |
| Printed Name of Attorney for Debtor(s) / Bar No. | promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, |
| Firm Name | as required in that section. Official Form 19 is attached. |
| Address | SANDRA L. COFFMAN Printed Name and title, if any, of Bankruptcy Petition Preparer |
| | #80492 |
| Telephone Number | Certification number. (If the bankruptcy petition preparer is not an individual, state the Certification number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| Date | 3552 CHEMEHUEVI BLVD |
| *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. | Address LAKE HAVASU CITY, AZ 86406 |
| Signature of Debtor (Corporation/Partnership) | X s/ |
| I declare under penalty of perjury that the information provided in this petition is true | |
| and correct, and that I have been authorized to file this petition on behalf of the | Date |
| debtor. The debtor requests the relief in accordance with the chapter of title 11, United States | Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. |
| Code, specified in this petition. | Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an |
| X Not Applicable Signature of Authorized Individual | individual. |
| 2-g | If more than one person prepared this document, attach to the appropriate official form for each person. |
| Printed Name of Authorized Individual | A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or |
| Title of Authorized Individual | both. 11 U.S.C. § 110; 18 U.S.C. § 156. |
| Date | |
| | |

UNITED STATES BANKRUPTCY COURT District of Arizona

| In re | ROBERT L REYNOLDS | Case No. | |
|-------|-------------------|----------|------------|
| | Debtor | | (if known) |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
|--|
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed. |
| ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] |
| |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.): |
|---|
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. ' 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: s/ ROBERT L REYNOLDS ROBERT L REYNOLDS |
| Date: 8/7/2012 |

B 1D (Official Form 1, Exh. D) (12/09) - Cont.

B6A (Official Form 6A) (12/07)

| In re: | ROBERT L REYNOLDS | Case No. |
|--------|-------------------|------------|
| | Debtor | (If known) |

SCHEDULE A - REAL PROPERTY

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|--|--------------------------------------|--|-------------------------------|
| MORTGAGE, RESIDENCE. | Co-Owner | | \$ 192,855.00 | \$ 192,855.00 |
| | Total | > | \$ 192,855.00 | |

(Report also on Summary of Schedules.)

| Case No. | |
|----------|------------|
| | (If known) |

Debtor

SCHEDULE B - PERSONAL PROPERTY

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------|---|--------------------------------------|---|
| 1. Cash on hand | Х | | | |
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | WELLS FARGO BANK CHECKING ACCT # 0749258828 | | 0.00 |
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | WELLS FARGO BANK SAVINGS ACCT # 2323044009 | | 0.00 |
| Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| Household goods and furnishings, including audio, video, and computer equipment. | | HOUSEHOLD FURNISHINGS, RESIDENCE. | | 1,000.00 |
| Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | | CLOTHING FOR ONE, RESIDENCE. | | 50.00 |
| 7. Furs and jewelry. | Х | | | |
| Firearms and sports, photographic, and other hobby equipment. | X | | | |
| g. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | Х | | | |
| Government and corporate bonds and other negotiable and nonnegotiable instruments. | Х | | | |
| 16. Accounts receivable. | Х | | | |
| | | | | |

| Case No. | |
|----------|------------|
| | (If known) |

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------|---|--------------------------------------|---|
| Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | Х | | | |
| Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | Х | | | |
| Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | х | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 2000 TOYOTA TUNDRA, PAID FOR, FRIEND GAVE TO DAUGHTER, NON OPERABLE, RESIDENCE. | | 2,500.00 |
| Automobiles, trucks, trailers, and other vehicles and accessories. | | 2001 FORD F250 DIESEL, PAID FOR, RESIDENCE. | | 5,000.00 |
| 26. Boats, motors, and accessories. | Χ | | | |
| 27. Aircraft and accessories. | Х | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| Machinery, fixtures, equipment and supplies used in business. | Х | | | |
| 30. Inventory. | Χ | | | |
| 31. Animals. | Χ | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | Χ | | | |
| 34. Farm supplies, chemicals, and feed. | Х | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

| Case No. | |
|----------|------------|
| | (If known) |

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|------------------|------|---|--------------------------------------|--|
| | _ | 2 continuation sheets attached Tot | al > | \$ 8,550.00 |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

| In re | ROBERT L REYNOLDS | Case No. | |
|-------|-------------------|----------|------------|
| | Dobtor | | (If known) |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: (Check one box) | ☐ Check if debtor claims a homestead exemption that exceeds \$146,450.* |
|---|---|
| ☐11 U.S.C. § 522(b)(2) | |
| ☑ 11 U.S.C. § 522(b)(3) | |

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|---|--|----------------------------------|--|
| 2001 FORD F250 DIESEL, PAID FOR, RESIDENCE. | ARS § 33-1125(8) | 5,000.00 | 5,000.00 |
| CLOTHING FOR ONE, RESIDENCE. | ARS § 33-1125(1) | 50.00 | 50.00 |
| HOUSEHOLD FURNISHINGS, RESIDENCE. | ARS § 33-1123 | 1,000.00 | 1,000.00 |
| MORTGAGE, RESIDENCE. | ARS § 33-1101 | 0.00 | 192,855.00 |
| WELLS FARGO BANK CHECKING ACCT # 0749258828 | ARS § 33-1126(A)(9) | 0.00 | 0.00 |
| WELLS FARGO BANK SAVINGS ACCT # 2323044009 | ARS § 33-1126(A)(9) | 0.00 | 0.00 |

^{*} Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | ROBERT L REYNOLDS | | Cas | e No. | |
|-------|-------------------|--------|-----|------------|--|
| | | Debtor | | (If known) | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|---|---------------------------------|
| ACCOUNT NO. 0655540930 GMAC MORTGAGE P.O. BOX 4622 WATERLOO, IA 50704 | | | Mortgage MORTGAGE, RESIDENCE. VALUE \$192,855.00 | | | | 192,855.00 | 0.00 |

continuation sheets attached

0

Subtotal → (Total of this page)

Total → (Use only on last page)

| \$ 192,855.00 | \$ 0.00 |
|------------------|------------|
| \$ 192,855.00 | \$ 0.00 |

(Report also on Summary of (If applicable, report Schedules) also on Statistical

also on Statistical Summary of Certain Liabilities and Related Data.)

| | Case No. | |
|--------|----------|-----------|
| Debtor | | (If known |

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). □ Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

1 continuation sheets attached

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | ROBERT L REYNOLDS | Case No. | |
|-------|-------------------|----------|------------|
| | NOBERT E RETROESO | • | (If known) |

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|-----------------------------------|---|
| ACCOUNT NO. | | | | | | | | | \$0.00 |

Sheet no. $\underline{1}$ of $\underline{1}$ continuation sheets attached to Schedule of Creditors Holding Priority Claims

(Totals of this page)

Subtotals >

Total >
(Use only on last page of the completed
Schedule E. Report also on the Summary of
Schedules.)

Total >
(Use only on last page of the completed
Schedule E. If applicable, report also on the
Statistical Summary of Certain Liabilities
and Related Data.)

\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

| In re | ROBERT L REYNOLDS | Case No. |
|-------|-------------------|------------|
| | Debtor | (If known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|--------------------------------------|---|------------|--------------|----------|--------------------|
| ACCOUNT NO. 5394061 | | | 12/12/2011 | | | | 1,050.00 |
| BUREAU OF MEDICAL ECONOMICS 326 EAST CONOADO RD PHOENIX, AZ 85004 | | | COLLECTION AGENCY FOR PREMIER EMERGENCY MEDICAL SPEC. | | | | |
| ACCOUNT NO. 4802137100328691 | | | 05/15/2008 | | | | 20,000.00 |
| CAPITAL ONE BANK P.O. BOX 60024 CITY OF INDUSTRY, CA 91716 | | • | CREDIT CARD. | | | | |
| ACCOUNT NO. 6019180080009729 | | | | | | | 1,300.00 |
| GE CAPITAL RETAIL BANK PO BOX 960061 ORLANDO, FL 32896 | | | CREDIT CARD. | | | | |
| ACCOUNT NO. ???? | | | | | | | 4,500.00 |
| IRS PO BOX 105416 ATLANTA, GA 30348-5416 | | • | ????? | | | | |
| ACCOUNT NO. 650830730 | | L | 11/07/2011 | | | | 2,150.00 |
| PRO CONSULTING SERVICES COLLECTIONS DIVISION PO BOX 66768 HOUSTN, TX 77266 | | | COLLECTION AGENCY FOR CITIBANK/SHELL COMMERCIAL. (FOR FOREST CREEK HOME IMPROVEMENT BUSINESS.) | | | | |

1 Continuation sheets attached

Subtotal > \$ 29,000.00

Total > (Use only on last page of the completed Schedule F.)

(Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| n r | _ I | $\mathbf{D} \cap \mathbf{E}$ | REDT | IDE | YNOL | פח |
|-----|-----|------------------------------|------|-----|------|----|

| Case No. | |
|----------|------------|
| | (If known) |

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| | | | (Continuation Sneet) | | | | |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 650-830-730 | | | 08/29/2011 | | | | 2,100.00 |
| SHELL FLEET PROCESSING CENTER PO BOX 183019 COLUMBUS, OH 43218 | | | CREDIT CARD. | | | | |
| ACCOUNT NO. 1504022409 | | | | | | | 39,200.00 |
| SPECIALIZED LOAN SERVICING, LLC PO BOX 105219 ATLANTA, GA 30348-5219 | | | HOME EQUITY LINE OF CREDIT. | | | | |
| ACCOUNT NO. 5474648802143943 WELLS???? PO BOX 54349 LOS ANGELES, CA 90054 | | | CREDIT CARD. | | | | 16,000.00 |

1 Continuation sheets attached

Sheet no. $\underline{1}$ of $\underline{1}$ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > \$ 57,300.00

Total > \$ 86,300.00

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| ROBERT L REYNOLDS Debtor | , Case No (If known) |
|---|--|
| SCHEDULE G - EXECUTORY CON | ITRACTS AND UNEXPIRED LEASES |
| ☐ Check this box if debtor has no executory contracts or unexpired le | eases. |
| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
| NONE | |
| | |

B6H (Official Form 6H) (12/07)

| In re: ROBERT L REYNOLDS Debtor | Case No. (If known) |
|----------------------------------|------------------------------|
| SCHEDULE H | - CODEBTORS |
| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |

| In re | ROBERT L REYNOLDS | Case | ∍ No. | |
|-------|-------------------|----------|-------|------------|
| | Debtor | <u> </u> | | (If known) |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: MARRIED FIL. SEP. DEPENDENTS OF | | F DEBTOR AND SPOUSE | | | | |
|---|--|---------------------|----------------|--|--|--|
| | RELATIONSHIP(S): | | | AGE(S): | | |
| Employment: | DEBTOR | | SPOUSE | | | |
| Occupation RETIF | RED | | | | | |
| Name of Employer NONE | Ē | | | | | |
| How long employed 7 YEA | ARS | | | | | |
| Address of Employer NONE | E | | | | | |
| INCOME: (Estimate of average or page case filed) | projected monthly income at time | DEBTC |)R | SPOUSE | | |
| 1. Monthly gross wages, salary, and | d commissions | \$ | 0.00 | \$ | | |
| (Prorate if not paid monthly.) 2. Estimate monthly overtime | | \$ | 0.00 | \$ | | |
| 3. SUBTOTAL | | \$ | 0.00 | \$ | | |
| 4. LESS PAYROLL DEDUCTIONS | 6 | | <u> </u> | <u> </u> | | |
| a. Payroll taxes and social se | curity | \$ | | \$ | | |
| b. Insurance | | \$ | 0.00 | \$ | | |
| c. Union dues | | \$ | 0.00 | \$ | | |
| d. Other (Specify) NON | <u>IE</u> | \$ | 0.00 | \$ | | |
| 5. SUBTOTAL OF PAYROLL DED | DUCTIONS | \$ | <u>505.75</u> | \$ | | |
| 6. TOTAL NET MONTHLY TAKE I | HOME PAY | \$ | <u>-505.75</u> | \$ | | |
| 7. Regular income from operation o | f business or profession or farm | | | | | |
| (Attach detailed statement) | | \$ | 0.00 | \$ | | |
| 8. Income from real property | | \$ | | \$ | | |
| 9. Interest and dividends | | \$ | 0.00 | \$ | | |
| Alimony, maintenance or suppo debtor's use or that of depend | rt payments payable to the debtor for the ents listed above. | \$ | 0.00 | \$ | | |
| 11. Social security or other governm | nent assistance | Φ. | E 060 02 | Φ. | | |
| (Specify) RETIREMENT | | \$ \$ | | \$ \$ | | |
| 12. Pension or retirement income13. Other monthly income | | Ψ | 0.00 | Ψ | | |
| (Specify) NONE | | \$ | 0.00 | \$ | | |
| 14. SUBTOTAL OF LINES 7 THR | OUGH 13 | \$ | 5,869.82 | \$ | | |
| 15. AVERAGE MONTHLY INCOM | IE (Add amounts shown on lines 6 and 14) | \$ | 5,364.07 | \$ | | |
| 16. COMBINED AVERAGE MONT totals from line 15) | THLY INCOME: (Combine column | | \$ 5,364. | 07 | | |
| 15.0.5 511 107 | | | | dules and, if applicable, on abilities and Related Data) | | |

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

NONE

| B6I | (Off | icial | Form | 1 6I) | (12/0 |)7) - (| Cont. |
|------|------|-------|------|-------|-------|---------|-------|
| In i | re | RO | BER | ΤL | RE\ | YNO | LDS |

Case No. ____

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Addendum

Additional Information

NONE

| In re ROBERT L REYNOLDS | | Case No. | |
|-------------------------|--------|----------|------------|
| | Debtor | | (If known) |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate

| any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly exp differ from the deductions from income allowed on Form22A or 22C. | | this form may |
|--|-------------------------|---------------|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a se expenditures labeled "Spouse." | eparate schedule of | |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 1,600.00 |
| a. Are real estate taxes included? Yes No | | <u> </u> |
| b. Is property insurance included? Yes No ✓ | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 300.00 |
| b. Water and sewer | \$ | 180.00 |
| c. Telephone | \$ | 210.00 |
| d. Other CABLE | \$ | 90.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 150.00 |
| 4. Food | \$ | 400.00 |
| 5. Clothing | \$ | 450.00 |
| 6. Laundry and dry cleaning | \$ | 50.00 |
| 7. Medical and dental expenses | \$ | 200.00 |
| 8. Transportation (not including car payments) | \$ | 50.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 0.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | _ | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 200.00 |
| c. Health | \$ <u> </u> | 8.00 |
| d. Auto | \$ <u> </u> | 150.00 |
| e. Other NONE | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | • | |
| (Specify) NONE | \$ <u></u> | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | c | 0.00 |
| a. Auto | \$ <u> </u> | 0.00 |
| b. Other NONE | Φ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other NONE | \$ | 0.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, | \$ | 4,038.00 |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | | 4,000.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following to NONE | he filing of this docur | nent: |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 5,364.07 |
| b. Average monthly expenses from Line 18 above | \$ | 4,038.00 |
| c. Monthly net income (a. minus b.) | \$ | 1,326.07 |

Case 0:12-bk-17232-EPB Doc 11 Filed 08/07/12 Entered 08/07/12 03:39:43 Desc Page 22 of 49 Main Document

United States Bankruptcy Court District of Arizona

| In re ROBERT L REYNOLDS | | Case No. | |
|-------------------------|-------|----------|---|
| D | ebtor | Chapter | 7 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|---------------|---------------|---------------|-------------|
| A - Real Property | YES | 1 | \$ 192,855.00 | | |
| B - Personal Property | YES | 3 | \$ 8.550.00 | | |
| C - Property Claimed as Exempt | YES | 1 | | | |
| D - Creditors Holding Secured Claims | YES | 1 | | \$ 192.855.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | YES | 2 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | YES | 2 | | \$ 86,300.00 | |
| G - Executory Contracts and Unexpired Leases | YES | 1 | | | |
| H - Codebtors | YES | 1 | | | |
| I - Current Income of Individual Debtor(s) | YES | 2 | | | \$ 5.364.07 |
| J - Current Expenditures of Individual Debtor(s) | YES | 1 | | | \$ 4.038.00 |
| тот | AL | 15 | \$ 201,405.00 | \$ 279,155.00 | |

United States Bankruptcy Court District of Arizona

| In re | ROBERT L REYNOLDS | Case No. | |
|-------|--|------------------|----------------------------|
| | Debtor | , Chapter | 7 |
| | STATISTICAL SUMMARY OF CERTAIN LIABILITI | ES AND RELATED I | DATA (28 U.S.C. § 159) |
| § 101 | If you are an individual debtor whose debts are primarily consumer debts, (8)), filing a case under chapter 7, 11 or 13, you must report all information req | | Bankruptcy Code (11 U.S.C. |

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | An | nount |
|---|----|-------|
| Domestic Support Obligations (from Schedule E) | \$ | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ | 0.00 |
| Student Loan Obligations (from Schedule F) | \$ | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E. | \$ | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ | 0.00 |
| TOTAL | \$ | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 5,364.07 |
|--|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 4,038.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20) | \$ 0.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 0.00 |
|--|---------|--------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 86,300.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 86,300.00 |

LAKE HAVASU CITY, AZ 86406

SANDRA L. COFFMAN

Signature of Bankruptcy Petition Preparer

Address 928-680-0748 Telephone No.:

X s/

| In re ROBERT L REYNOLDS | | Case No. | |
|--|---|---|--|
| Debtor | | | (If known) |
| DECLARATION CONCER | RNING DEBTOR'S | SCHEDULES | |
| DECLARATION UNDER PENAL | ΓY OF PERJURY BY IND | IVIDUAL DEBTOR | |
| I declare under penalty of perjury that I have read the foregoing sum sheets, and that they are true and correct to the best of my knowledge, in | , , | f <u>17</u> | |
| Date: 8/7/2012 | Signature: s/ ROBERT L | | |
| | ROBERT L R | | |
| | | Debtor | |
| | [If joint case, both spouses m | nust sign] | |
| DECLARATION AND SIGNATURE OF NON-ATTORM I declare under penalty of perjury that: (1) I am a bankruptcy petition compensation and have provided the debtor with a copy of this document 342(b); and, (3) if rules or guidelines have been promulgated pursuant to petition preparers, I have given the debtor notice of the maximum amount debtor, as required by that section. | preparer as defined in 11 U.S.C. and the notices and information r 11 U.S.C. § 110(h) setting a max | § 110; (2) I prepared this doc equired under 11 U.S.C. §§ 1 imum fee for services charges | ument for 10(b), 110(h) and able by bankruptcy |
| SANDRA L. COFFMAN | #80492 | | |
| Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer | Certification No. | | |
| If the bankruptcy petition preparer is not an individual, state the name, titi person, or partner who signs this document. | le (if any), address, and social sec | curity number of the officer, p | rincipal, responsible |
| 3552 CHEMEHIJEVI BI VD | | | |

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

8/7/2012

Date

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT District of Arizona

| re: | Robert l Reynoli | OS . | Case No. |
|------------------|--|--|---|
| - | | Debtor | (If known) |
| | | STATEMENT OF FIN | IANCIAL AFFAIRS |
| | 1. Income from | employment or operation of busine | ess |
| one | debtor's business, in beginning of this cal- years immediately p of a fiscal rather that fiscal year.) If a joint | cluding part-time activities either as an empendar year to the date this case was comme preceding this calendar year. (A debtor that report fiscal year incompetition is filed, state income for each spoute income of both spouses whether or not a | employment, trade, or profession, or from operation of the loyee or in independent trade or business, from the enced. State also the gross amounts received during the two naintains, or has maintained, financial records on the basis ome. Identify the beginning and ending dates of the debtor's se separately. (Married debtors filing under chapter 12 or oint petition is filed, unless the spouses are separated and a |
| | AMOUNT | SOURCE | FISCAL YEAR PERIOD |
| | 0.00 | EMPLOYMENT | 2010 |
| | 0.00 | EMPLOYMENT | 2011 |
| one | State the amount of business during the filed, state income for | two years immediately preceding the commor each spouse separately. (Married debtors | on or business om employment, trade, profession, operation of the debtor's nencement of this case. Give particulars. If a joint petition is filing under chapter 12 or chapter 13 must state income for ouses are separated and a joint petition is not filed.) |
| | AMOUNT | SOURCE | FISCAL YEAR PERIOD |
| | 64,363.84 | SOC SEC/ RETIREMENT | 2010 |
| | 64,363.84 | SOC SEC/ RETIREMENT | 2011 |
| one ⊻í | a. Individual or joint services, and other the aggregate value (*) any payments the repayment schedule | as appropriate, and c. debtor(s) with primarily consumer debts: List debts to any creditor made within 90 days ir of all property that constitutes or is affected at were made to a creditor on account of a c | all payments on loans, installment purchases of goods or nmediately preceding the commencement of this case unles by such transfer is less than \$600. Indicate with an asterisk omestic support obligation or as part of an alternative geting and credit counseling agency. (Married debtors filing |

DATES OF

PAYMENTS

AMOUNT

PAID

AMOUNT

STILL OWING

unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF

CREDITOR

None $\mathbf{\Lambda}$

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ **TRANSFERS** **AMOUNT** PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None $\mathbf{\Delta}$

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF **PAYMENT** **AMOUNT** PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATIO

STATUS OR DISPOSITION

 $\mathbf{\Lambda}$

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DESCRIPTION OF PERSON FOR WHOSE DATE OF AND VALUE OF BENEFIT PROPERTY WAS SEIZED SEIZURE **PROPERTY**

5. Repossessions, foreclosures and returns

None $\mathbf{\Delta}$

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **DESCRIPTION** DATE OF REPOSSESSION. FORECLOSURE SALE,

OF CREDITOR OR SELLER

NAME AND ADDRESS

TRANSFER OR RETURN

AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TERMS OF

NAME AND ADDRESS DATE OF ASSIGNMENT
OF ASSIGNEE ASSIGNMENT OR SETTLEMENT

None **☑**

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

NAME AND ADDRESS

OF COURT

OF CUSTODIAN

NAME AND ADDRESS

OF COURT

CASE TITLE & NUMBER

ORDER

DESCRIPTION

AND VALUE OF

PROPERTY

7. Gifts

None **☑** List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS RELATIONSHIP DESCRIPTION
OF PERSON TO DEBTOR, DATE AND VALUE OF
OR ORGANIZATION IF ANY OF GIFT GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION DESCRIPTION OF CIRCUMSTANCES AND, IF

AND VALUE OF LOSS WAS COVERED IN WHOLE OR IN PART DATE OF PROPERTY BY INSURANCE, GIVE PARTICULARS LOSS

NO LOSSES DUE TO FIRE, THEFT, OR GAMBLING 2010/2011.

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE OF PAYMENT, AMOUNT OF MONEY OR OF PAYEE NAME OF PAYOR IF DESCRIPTION AND VALUE

SANDRA L COFFMAN OTHER THAN DEBTOR OF PROPERTY \$200.00

3552 CHEMHUEVI BLVD. LAKE HAVASU, AZ 86406

10. Other transfers

None V

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIBE PROPERTY

TRANSFERRED DATE AND VALUE RECEIVED

None \square

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

RELATIONSHIP TO DEBTOR

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR

INTEREST IN PROPERTY

11. Closed financial accounts

NAME AND ADDRESS OF TRANSFEREE,

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE **AMOUNT AND** DATE OF SALE **OR CLOSING**

12. Safe deposit boxes

None ✓

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS **DESCRIPTION** OF

DATE OF TRANSFER OR SURRENDER,

TO BOX OR DEPOSITOR **CONTENTS** IF ANY

13. Setoffs

None V

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF **SETOFF**

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS DESCRIPTION AND VALUE

OF OWNER OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None **☑**

Ø

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None **☑** If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor 's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

 \square

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL

ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None **☑**

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None \square

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None \square

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

LAST FOUR DIGITS

OF SOCIAL SECURITY ADDRESS OR OTHER INDIVIDUAL

TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN NATURE OF BUSINESS

BEGINNING AND ENDING

DATES

None \square NAME

Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 8/7/2012

Signature of Debtor

s/ ROBERT L REYNOLDS **ROBERT L REYNOLDS**

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

| SANDRA L. COFFMAN | #80492 |
|---|--|
| Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer | Certification No. |
| If the bankruptcy petition preparer is not an individual, state the name, title (if any), acresponsible person, or partner who signs this document. | ldress, and social-security number of the officer, principal |
| 3552 CHEMEHUEVI BLVD | |
| LAKE HAVASU CITY, AZ 86406 | |
| <u> </u> | |
| Address | |
| X <u>s/</u> | 8/7/2012 |
| SANDRA L. COFFMAN | Date |

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

Signature of Bankruptcy Petition Preparer

UNITED STATES BANKRUPTCY COURT District of Arizona

| In re | ROBERT L | REYNOLDS tor | | Case No. | Chapter 7 |
|------------------------|--|---------------------|-------------------------------------|------------------------------|-------------------------------|
| СНАР | TER 7 INDIVID | | R'S STATEME | | |
| | nts secured by property of the estate. Attach addition | | | ted for EACH de | bt which is secured |
| Property No | . 1 | | | | |
| Creditor's N | | | Describe Property MORTGAGE, RESI | _ | : |
| | be (check one): rendered | ☑ Retained | | | |
| □ Red | he property, I intend to (intend to (intended to (intende | | _ (for example, avoid | l lien using 11 U | .S.C. § 522(f)) |
| Property is (☑ Cla | check one): imed as exempt | | ■ Not claimed as ex | empt | |
| | sonal property subject to d lease. Attach additiona . 1 | | | Part B must be co | ompleted for |
| Lessor's Na | ame: | Describe Lease | d Property: | Lease will be to 11 U.S.C. § | Assumed pursuant § 365(p)(2): |
| I declare unde | uation sheets attached (er penalty of perjury than bt and/or personal pro | at the above indica | | to any property | of my estate |
| Date: 8/7/2012 | ! | | s/ ROBERT L REYN | IOLDS | |

ROBERT L REYNOLDS

Signature of Debtor

UNITED STATES BANKRUPTCY COURT District of Arizona

Exhibit "C"

[If, to the best of the debtor's knowledge, the debtor owns or has possession of property that poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety, attach this Exhibit "C" to the petition.]

| · · · · · · · · · · · · · · · · · · · | | |
|---------------------------------------|--|---|
| In re: R | OBERT L REYNOLDS | Case No.: |
| | | Chapter: 7 |
| | Debtor(s) | |
| | Exhibit "C" to Volunt | tary Petition |
| the debtor imminent a | . Identify and briefly describe all real or personal protection that, to the best of the debtor's knowledge, poses and identifiable harm to the public health or safety | or is alleged to pose a threat of |
| N/A | | |
| | | |
| | | |
| question 1, or otherwis | . With respect to each parcel of real property or ite, describe the nature and location of the dangerous se, that poses or is alleged to pose a threat of immitth or safety (attach additional sheets if necessary): | condition, whether environmental inent and identifiable harm to the |
| N/A | | |
| | | |
| | | |
| | | |
| | | |

UNITED STATES BANKRUPTCY COURT District of Arizona

| la sa DODERT I DEVOICE DO | Case No. |
|---|--|
| In re ROBERT L REYNOLDS Debtor | , Chapter <u>7</u> |
| | GNATURE OF NON-ATTORNEY |
| | PREPARER (See 11 U.S.C. § 110) |
| | |
| (2) I prepared the accompanying document(s) listed copy of the document(s) and the attached notice as rules or guidelines have been promulgated pursuant | am a bankruptcy petition preparer as defined in 11 U.S.C. § 110 below for compensation and have provided the debtor with a required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and (3) if to 11 U.S.C. § 110(h) setting a maximum fee for services given the debtor notice of the maximum amount before preparing fee from the debtor, as required by that section. |
| Accompanying documents: | Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer: |
| | SANDRA L. COFFMAN |
| | Social-Security No. of Bankruptcy Petition Preparer (Required by 11 U.S.C. § 110): |
| | #80492 |
| | he name, title (if any), address, and social-security number of the |
| If the bankruptcy petition preparer is not an individual, state to officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD | he name, title (if any), address, and social-security number of the |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 | he name, title (if any), address, and social-security number of the |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address | he name, title (if any), address, and social-security number of the |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address 928-680-0748 | he name, title (if any), address, and social-security number of the |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address 928-680-0748 Telephone No.: | he name, title (if any), address, and social-security number of the is document. |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 | he name, title (if any), address, and social-security number of the is document. |
| officer, principal, responsible person, or partner who signs the 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address 928-680-0748 Telephone No.: | he name, title (if any), address, and social-security number of the is document. |
| 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address 928-680-0748 Telephone No.: X SANDRA L. COFFMAN Signature of Bankruptcy Petition Preparer | he name, title (if any), address, and social-security number of the is document. |
| 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 Address 928-680-0748 Telephone No.: X SANDRA L. COFFMAN Signature of Bankruptcy Petition Preparer Names and social-security numbers of all other individuals w | he name, title (if any), address, and social-security number of the is document. 8/7/2012 Date |

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

NOTICE TO DEBTOR BY NON-ATTORNEY BANKRUPTCY PETITION PREPARER

[Must be filed with any document(s) prepared by a bankruptcy petition preparer.]

I am a bankruptcy petition preparer. I am not an attorney and may not practice law or give legal advice. Before preparing any document for filing as defined in § 110(a)(2) of the Bankruptcy Code or accepting any fees, I am required by law to provide you with this notice concerning bankruptcy petition preparers. Under the law, § 110 of the Bankruptcy Code (11 U.S.C. § 110), I am forbidden to offer you any legal advice, including advice about any of the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether commencing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to retain your home, car, or other property after commencing a case under the Bankruptcy Code;
- the tax consequences of a case brought under the Bankruptcy Code;
- the dischargeability of tax claims;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement with a creditor to reaffirm a debt;
- how to characterize the nature of your interests in property or your debts; or
- bankruptcy procedures and rights.

[The notice may provide additional examples of legal advice that a bankruptcy petition preparer is not authorized to give.]

In addition, under 11 U.S.C. § 110(h), the Supreme Court or the Judicial Conference of the United States may promulgate rules or guidelines setting a maximum allowable fee chargeable by a bankruptcy petition preparer. As required by law, I have notified you of this maximum allowable fee, if any, before preparing any document for filing or accepting any fee from you.

| s/ ROBERT L REYNOLDS | 8/7/2012 |
|----------------------|----------|
| ROBERT L REYNOLDS | |
| Signature of Debtor | Date |

In a joint case, both spouses must sign.]

B22A (Official Form 22A) (Chapter 7) (12/10)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS |
|----|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |
| 1C | ☐ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard |
| | a. |
| | ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; |
| | OR |
| | b. I am performing homeland defense activity for a period of at least 90 days /or/ |
| | ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. |
| | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION |
| | |

| 2 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. ☑ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. c. □ Married, not filing jointly, without the declaration of separate households set out in line 2.b above. Complete both Column A ("Debtor's Income") for Lines 3-11. d. □ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. | | | | | | | |
|----|---|---|--|--------------------------------|----------|--|--|--|
| | All figures must reflect average monthly incoms ix calendar months prior to filing the bankrupt before the filing. If the amount of monthly incodivide the six-month total by six, and enter the | he last day of the month six months, you must | Column A Debtor's Income | Column B Spouse's Income | | | | |
| 3 | Gross wages, salary, tips, bonuses, overtin | ne, commissions. | | \$0.00 | \$ | | | |
| 4 | Income from the operation of a business, p Line a and enter the difference in the appropria than one business, profession or farm, enter a attachment. Do not enter a number less than z expenses entered on Line b as a deduction | If you operate more not provide details on an any part of the business | | | | | | |
| | a. Gross Receipts b. Ordinary and necessary business expenses | | \$ 0.00 \$ 0.00 | | | | | |
| | c. Business income | | Subtract Line b from Line a | \$0.00 | \$ | | | |
| 5 | Rent and other real property income. Subtrain the appropriate column(s) of Line 5. Do not include any part of the operating expenses a. Gross Receipts b. Ordinary and necessary operating expenses | \$0.00 | \$ | | | | | |
| | C. Rent and other real property income | | Subtract Line b from Line a | 7 5.55 | <u> </u> | | | |
| 6 | Interest, dividends, and royalties. | | | \$0.00 | \$ | | | |
| 7 | Pension and retirement income. | | | \$0.00 | \$ | | | |
| 8 | Any amounts paid by another person or end expenses of the debtor or the debtor's depethat purpose. Do not include alimony or sepail by your spouse if Column B is completed. Each one column; if a payment is listed in Column A | \$0.00 | \$ | | | | | |
| 9 | Unemployment compensation. Enter the am However, if you contend that unemployment co was a benefit under the Social Security Act, do Column A or B, but instead state the amount in | | | | | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$0.00 | Spouse \$ | \$0.00 | \$ | | | |
| 10 | Income from all other sources. Specify sources on a separate page. Do not include a paid by your spouse if Column B is comalimony or separate maintenance. Do not in Security Act or payments received as a victimal a victim of international or domestic terrorism. | nlimony or separate inpleted, but include include any benefits of a war crime, crime | maintenance payments e all other payments of received under the Social | | | | | |

| | a. SOC SEC/ RETIREMENT Total and enter on Line 10. | \$ 5,364.07 | \$5,364.07 | \$ | |
|----|---|----------------------------------|-----------------------|-----------------|--|
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Li and, if Column B is completed, add Lines 3 thru 10 in Column | \$5,364.07 | \$ | | |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B I 11, Column A to Line 11, Column B, and enter the total. If Columpleted, enter the amount from Line 11, Column A. | \$ 5,364.07 | | | |
| | Part III. APPLICATION OF § | 707(b)(7) EXCLUSION | | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | | | | |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | |
| | a. Enter debtor's state of residence: AZ b. | Enter debtor's household size: 1 | | \$42,691.00 | |
| | Application of Section 707(b)(7). Check the applicable box and pr | oceed as directed. | | | |
| 15 | ☐ The amount on Line 13 is less than or equal to the a arise" at the top of page 1 of this statement, and complete Part VIII; of | | | mption does not | |
| | The amount on Line 13 is more than the amount on Li | ne 14. Complete the remaining pa | ts of this statement. | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

| | Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | |
|---|--|-----------|--|--|--|--|
| 16 | 16 Enter the amount from Line 12. | | | | | |
| Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. | | | | | | |
| | a. \$ | | | | | |
| | Total and enter on Line 17. | \$ 0.00 | | | | |
| 18 Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | | | | | | |
| | Part V. CALCULATION OF DEDUCTIONS FROM INCOME | | | | | |
| | Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | |
| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | \$ 565.00 | | | | |
| | | | | | | |

| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Outof- Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Outof- Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 198. Persons under 65 years of age Persons 65 years of age or older | | | | | | |
|-----|--|---|---|--|--|---------------------------------------|-----------|
| | | Illowance per person Jumber of persons | 60.00 | a2. | Allowance per person Number of persons | 1.00 | |
| | | Subtotal | 0.00 | b2. c2. | Subtotal | 144.00 | \$ 144.00 |
| 20A | and Uti is avail consist | lities Standards; non-mortga able at www.usdoj.gov/ust/ | ige expenses for the or from the clerk of currently be allowe | ne appoint and the left and the | expenses. Enter the amount blicable county and family size ankruptcy court). The applicate exemptions on your federal in upport. | e. (This information able family size | \$ 407.00 |
| 20B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court)(the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. | | | | | | |
| | a. | IRS Housing and Utilities Stand | ards; mortgage/renta | l exper | se \$ 777.00 | | |
| | b. | Average Monthly Payment for an any, as stated in Line 42. | ny debts secured by h | ome, i | \$ | | |
| | C. | Net mortgage/rental expense | | | Subtract Line b from Line a | | \$ 777.00 |
| 21 | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and | | | | | | \$ |
| 22A | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: | | | | | | \$ 472.00 |
| 22B | Local Standards: transportation; additional public transportation expense. If you pay the operating | | | | | entitled to an lic Transportation" | \$ 0.00 |

| 23 | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs 5 17.00 b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42. | | | | | |
|---|--|---|---------------------------------------|------------------|--|--|
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | | \$ 517.00 | | |
| 24 | Local Standards: transportation ownership/lease expense the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" fr (available at www.usdoj.gov/ust/ or from the clerk of the bank Average Monthly Payments for any debts secured by Vehicle Line a and enter the result in Line 24. Do not enter an amount at IRS Transportation Standards. Ownership Costs | rom the IRS Local Standards ruptcy court); enter in Line b 2, as stated in Line 42; subtr nt less than zero. | s: Transportation the total of the | | | |
| | b. Average Monthly Payment for any debts secured by Vehicle 2, | \$517.00 \$ | | | | |
| | as stated in Line 42 c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | | \$ 517.00 | | |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes. social security taxes. and Medicare taxes. Do not include real estate or sales taxes. | | | | | |
| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | | | |
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | | | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. | | | | | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service— such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | | | | | |
| Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. | | | | | | |
| | Subpart B: Additional Living | Expense Deductions | | | | |

| | | Note | e: Do not include any expens | ses that you have list | ed in Lines 19-32 | | | | | |
|----|---|---|---|--|--|---------|--|--|--|--|
| | expense | Insurance, Disab | oility Insurance, and Health S es set out in lines a-c below tha ents. | Savings Account Exp | enses. List the monthly | | | | | |
| 34 | b. | Disability Insura | | \$0.00 | | | | | | |
| | C. | Health Savings | | \$ | | | | | | |
| | <u> </u> | Tioditi Cavingo | , toodant | Ψ | | | | | | |
| | Total and enter on Line 34 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ Continued contributions to the care of household or family members. Enter the total average actual | | | | | | | | | |
| 35 | monthly elderly, unable | y expenses that yo chronically ill, or to pay for such ex | ou will continue to pay for the r disabled member of your hous penses. | easonable and necess ehold or member of yo | ary care and support of an our immediate family who is | \$ 0.00 | | | | |
| 36 | you act Service by the | ually incurred to nes Act or other app court. | | ily under the Family Vi | iolence Prevention and required to be kept confidential | \$ 0.00 | | | | |
| 37 | Local S provide | standards for House e your case trust | ter the total average monthly a sing and Utilities, that you actu ee with documentation of yo unt claimed is reasonable ar | ally expend for home our actual expenses, | energy costs. You must | \$ | | | | |
| 38 | you act second trustee is reas | ually incur, not to ary school by you with documenta onable and nece | exceed \$147.92* per child, for r dependent children less than ation of your actual expenses assary and not already accou | attendance at a privat 18 years of age. You s, and you must expl nted for in the IRS St | must provide your case ain why the amount claimed andards. | \$ 0.00 | | | | |
| 39 | clothing Nationa www.us | g expenses exceed al Standards, not t <u>sdoj.gov/ust/</u> or fro | thing expense. Enter the tota I the combined allowances for o exceed 5% of those combine om the clerk of the bankruptcy onable and necessary. | food and clothing (apped allowances. (This in | parel and services) in the IRS | \$ | | | | |
| 40 | | | contributions. Enter the amoun ritable organization as defined in 26 | | o contribute in the form of cash or | \$ 0.00 | | | | |
| 41 | Total A | Additional Expens | se Deductions under § 707(b |). Enter the total of Lir | nes 34 through 40. | \$ 0.00 | | | | |
| | | | Subpart C: Deduc | tions for Debt Paym | ent | | | | | |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | | | | | | | | | |
| | | Name of | Property Securing the Debt | Average | Does payment | | | | | |
| | | Creditor | | Monthly Payment | include taxes | | | | | |
| | a. | | | \$ | or insurance? yes no | | | | | |
| | ч. | | | Ψ | | | | | | |
| | | | | | Total: Add Lines a, b and c | \$ 0.00 | | | | |

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependent you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the credit in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosur List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amounts. | | | | | | |
|---|---|---|-------------------------------|---------|--|--|--|
| | a. | | Tatal: Add Linea a h and a | \$ 0.00 | | | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. | | | | | | |
| | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. | | | | | | |
| 45 | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | x 5.30 | | | | |
| | C. | Average monthly administrative expense of Chapter 13 case | Total: Multiply Lines a and b | \$ 0.00 | | | |
| 46 | | | | | | | |
| Subpart D: Total Deductions from Income | | | | | | | |
| 47 | Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46. | | | | | | |

| | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | | | | | | |
|----|---|------------------|--|--|--|--|--|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ 5,364.07 | | | | | |
| 49 | 49 Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | | | | | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result | \$ 1,259.32 | | | | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | | | | |
| 52 | Initial presumption determination. Check the applicable box and proceed as directed. The amount on Line 51 is less than \$7,025* Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. The amount set forth on Line 51 is more than \$11,725*. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55). | | | | | | |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ | | | | | |
| 54 | 54 Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. \$ 0.00 | | | | | | |
| 55 | Secondary presumption determination. Check the applicable box and proceed as directed. The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not aris page 1 of this statement, and complete the verification in Part VIII. | e" at the top of | | | | | |

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. | | | | | | | |
|---|---|------------------------------|----------------|--|--|--|--|--|
| | Part VII. ADDITIONAL EXPENSE CLAIMS | | | | | | | |
| Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are require health and welfare of you and your family and that you contend should be an additional deduction from your monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figure reflect your average monthly expense for each item. Total the expenses. | | | | | | | | |
| | | Expense Description | Monthly Amount | | | | | |
| | a. | | \$ | | | | | |
| | | Total: Add Lines a, b, and c | \$0.00 | | | | | |
| | Part VIII: VERIFICATION | | | | | | | |
| 57 | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.) | | | | | | | |

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$46 administrative fee: Total fee \$1046)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

UNITED STATES BANKRUPTCY COURT **DISTRICT OF ARIZONA**

| In re ROBERT L REYNOLDS | Case No. | |
|---|---|---|
| Debtor | Chapter 7 | |
| CERTIFICATION OF NOTICE UNDER § 342(b) OF THI | | DR(S) |
| Certificate of [Non-Attorney] I | Sankruptcy Petition Prepare | er |
| I SANDRA L. COFFMAN , the [non-attorney] bankrupt certify that I delivered to the debtor the attached notice, as requ | ccy petition preparer signing the cuired by § 342(b) of the Bankrupt | debtor's petition, hereby tcy Code. |
| SANDRA L. COFFMAN | #80492 | |
| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: BANKRUPTCIE'S BY SANDIE 3552 CHEMEHUEVI BLVD LAKE HAVASU CITY, AZ 86406 928-680-0748 Xs/ Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number | Social Security number (If the is not an individual, state the sofficer, principal, responsible phankruptcy petition preparer.) 110.) | Social Security number of the person, or partner of the |
| is provided above. | | |
| Certificate of | f the Debtor | |
| I, the debtor, affirm that I have received and read this notice, as requi | red by § 342(b) of the Bankruptcy Cod | e. |
| ROBERT L REYNOLDS Xs/F | ROBERT L REYNOLDS | 8/7/2012 |
| Tillited Name of Debtor | BERT L REYNOLDS nature of Debtor | Date |
| Instructions: Attach a copy of Form B 201A, Notice to Consun | and Deleter(e) Harden S 040(h) of the | sha Dankayatay Cada |

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy

petition preparers on page 3 of Form B1 also include this certification.

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

| In re | ROBERT L REYNOLDS | Case No. | |
|-------|-------------------|----------|---|
| | Debtor. | Chapter | 7 |

STATEMENT OF MONTHLY NET INCOME

The undersigned certifies the following is the debtor's monthly income .

| Income: | Debtor | | |
|--|--------------------|--|--|
| Six months ago | \$0.00 | | |
| Five months ago | \$0.00 | | |
| Four months ago | \$0.00 | | |
| Three months ago | \$ <u>0.00</u> | | |
| Two months ago | \$ <u>0.00</u> | | |
| Last month | \$0.00 | | |
| Income from other sources | \$ <u>5,364.07</u> | | |
| Total net income for six months preceding filing | \$ 5,364.07 | | |
| Average Monthly Net Income | \$ 894.01 | | |

Attached are all payment advices received by the undersigned debtor prior to the petition date, I declare under penalty of perjury that I have read the foregoing statement and that it is true and correct to the best of my knowledge, information, and belief.

| Dated: | 8/7/2012 | |
|--------|----------|----------------------|
| | | s/ ROBERT L REYNOLDS |
| | | ROBERT L REYNOLDS |
| | | Debtor |

UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

| In re | |) | | | |
|-------------------|--|----------------|---------------------|--|--|
| ROBERT L REYNOLDS | |) Chapter | 7 | | |
| | |) Case No. | | | |
| | Debtor(s) |) | | | |
| | Declaration of Evidence of Emplo | yers' Payments | Within 60 Days | | |
| I | Attached hereto are copies of all payment advices, pay stubs or other evidence of payment received by the debtor from any employer within 60 days prior to the filing of the petition; | | | | |
| | Debtor has received no payment advices, pay stubs or other evidence of payment from any employer within 60 days prior to the filing of the petition; or | | | | |
| | Debtor has received the following payments from employers within 60 days prior to the filing of the petition: \$ | | | | |
| | Debtor declares the foregoing to be true and correct under penalty of perjury. | | | | |
| | | | | | |
| Dated: | 8/7/2012 | | T L REYNOLDS | | |
| | | ROBERT L | REYNOLDS | | |
| | | | Signature of Debtor | | |

If attaching pay stubs or other payment advices, it is your responsibility to redact (black out) any social security numbers, names of minor children, dates of birth or financial account numbers before attaching them to this document.